

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|---------------|---------------------|
| FEE DETERMINATION | W.G | | 9/16/00 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 71435 1531 | 12/20/00 4:25 C1 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 1 | 1/17/02 |
| 2 | 1/17/02 |
| 3 | 1/17/02 |
| 4 | ✓ |
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| Claim | Date |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here

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